## DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the orig and joint inventor (if plural	inal, first and sole inventor (if only one name inames are listed below) of the subject matt	er which is claimed and for which
a patent is sought on the	invention entitled POTTY WITH DISPO	SABLE LINER DISPENSE
the specification of which is attached hereto.		
and was amended on I hereby state that I I tion, including the claims	as Application Serial No (if applicable),(ff applicable), ave reviewed and understand the contents , as amended by any amendment referred to the to disclose information which is material to	above.
tion in accordance with T I hereby claim foreign cation(s) for patent or inve	itle 37, Code of Federal Regulations, \$1.56( n priority benefits under Title 35, United State ntor's certificate listed below and have also i stor's certificate having a filing date before	). s Code §119 of any foreign appli- dentified below any foreign appli-
	PRIOR FOREIGN APPLICATION	S) Priority Claimed:
tion(s) listed below and, in closed in the prior United United States Code, §112,	enefit under Title 35, United States Code, §1 sofar as the subject matter of each of the cla States application in the manner provided i acknowledge the duty to disclose material	Ims of this application is not dis- by the first paragraph of Title 35, information as defined in Title 37,
tion(s) listed below and, in closed in the prior United United States Code, §112, Code of Federal Regulatio the national or PCT Intern	sofar as the subject matter of each of the cit States application in the manner provided acknowledge the duty to disclose material ins, §1.56(a) which occurred between the filling ational filling date of this application:	20 of any United States applica- lms of this application is not div- y the first paragraph of Title 35, nformation as defined in Title 37, I date of the prior application and
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	Post Office Address	Post Office Address		City State or Country .		
1	nade on Informa he knowledge t nent, or both, ur	ition and belief are bel hat willful false state nder section 1001 of T	ieved to be true; ments and the I itle 18 of the Un he application	y own knowledge are tru and further that these sta ike so made are punisha ited States Code, and tha or any patent issuing the	atements were made with able by fine or imprison- at such willful false state- ereon.	
Date 9-18-03			Signature of Inventor RUSSELL W PIER			
1	Date9-1	E-03	Signature of Inventor JENNIFER K PIER			
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